

South Carolina Nurses Association  
**CONTINUING EDUCATION APPROVER COMMITTEE**

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**DOCUMENTATION FORM**

TITLE OF ACTIVITY: \_\_\_\_\_

<b>OBJECTIVES</b>	<b>CONTENT (topics)</b>	<b>TIME FRAME</b>	<b>FACULTY</b>	<b>TEACHING STRATEGIES</b>
<i>List in operational/ behavioral terms. Each objective must have corresponding content</i>	<i>List each topic and provide an outline of the content to be presented</i>	<i>List for each topic, breaks and meals</i>	<i>List for each topic</i>	<i>Describe method(s) used for each topic</i>